Children's Hospital LOS ANGELES™

ADOLESCENT MEDICINE

Presents

<u>THE INVISIBLE WOUNDS:</u>

Effects of Complex Trauma on Brain development:
Promoting Healing Via Trauma Informed
Care/Consciousness

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"MOVING FORWARD TOGETHER"

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Objectives

- Understand the effects of trauma on brain development
- Become familiar with Attachment Theory and ARC (Attachment, Self Regulation, and Competency)
- Create interventions that promote healing via ARC
- Understand Normative Abuse
- Become familiar with Youth Resilience
- Outline a Self-Care Plan
- Explore interventions from an "out-of-the-box," Trauma-Informed perspective

- "Paying attention in a particular way"
- On Purpose
- In the Present Moment
- Non-Judgmentally

Jon Kabat-Zinn

The "What" Skills

1. Observe: Pay attention to the experience
2. Describe: Put words on the experience: Name your feelings
3. Participate: Become one with the experience

The "How" Skills

1. Do not Judge: See without evaluation
2. Stay Focused: Do one thing at the time
3. Do What Works: Do what you need to do to achieve your goals

From: SPARCS: (Structured Psychotherapy for Adolescents Responding to Chronic Stress)
Mandy Habib, Psy. D; Victor Labruna, Ph.D (2005)

States of Mind

- Intellectual
- Emotional
- (Intuition)
- Wise

From: SPARCS: (Structured Psychotherapy for Adolescents Responding to Chronic Stress) Mandy Habib, Psy. D; Victor Labruna, Ph.D (2005)

- What is Trauma?

  – Trauma: (noun) from Gr. Meaning wound or injury

- Elements of Trauma

  – It is unexpected

  – The person is unprepared

  – Nothing one can do to prevent it from happening

  – It leaves the person feeling vulnerable, helpless, & ineffective

  – Most common, preventable and treatable factor

- Cortisol and the Brain Stem
- Fight
- Flight
- Freeze

"Normal" & Neglected Brain
(Image from Children's Hospital Michigan)
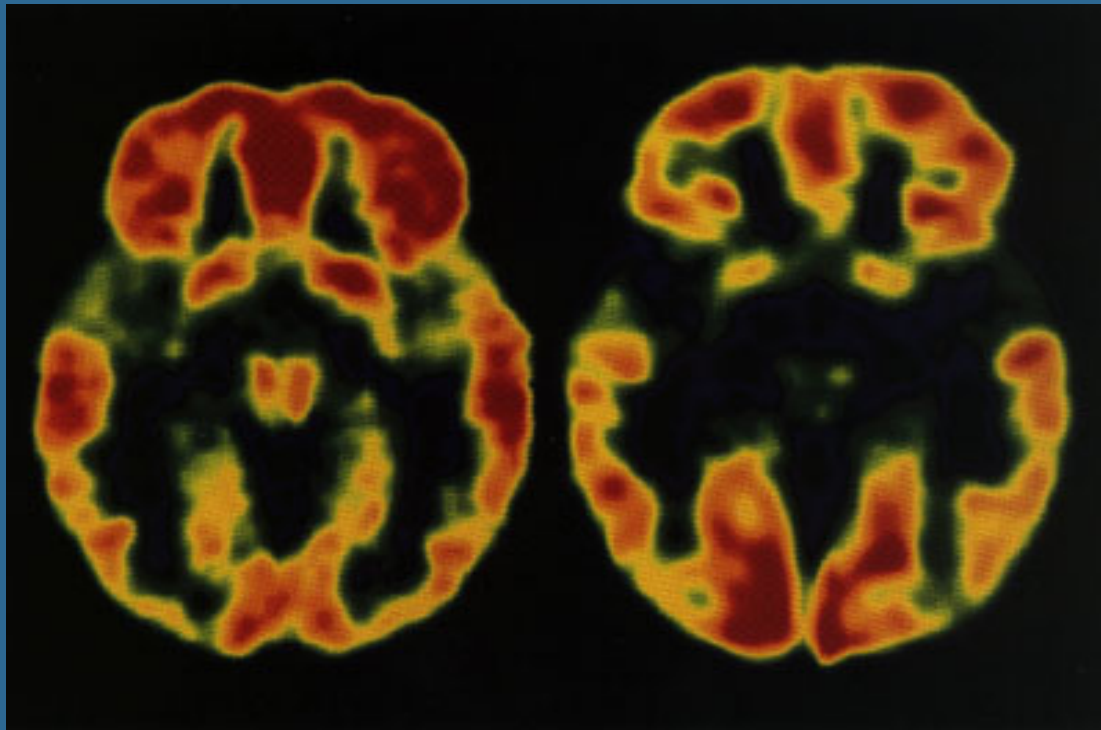
- First outlined by John Bowlby in 1958.
- Attachment describes the preferential bond between an infant and a care giver
- Attachment has ontogenic origins since it promotes the survival of the species
- Every human develops in the context of relationships.
- Attachment figure: The person with whom the child makes and maintains a strong emotional bond

Attachment is the capacity to form and maintain a healthy emotional bond with another person or persons which is a source of safety and mutual enjoyment

Repeated and prolonged unavailability of the caregiver results in the following stages:

1. Protest
2. Despair
3. Detachment

Working Models:

- Of the <u>Self</u>:
- A child's sense of self is formed in a context of relationships
- Our sense of self is developed by the way we are treated by our caregivers
- Of the <u>World</u>:
- Safe vs. Unsafe

- **<u>Protective Factors promoting Secure Attachment</u>**
    1. Continuity
    2. Predictability
    3. Responsiveness
    4. Warmth
    5. Attunement

- Secure Attachment: Having a predictable, safe, warm bond with a care giver

    1. Self Reliant

    2. Efficient

    3. Persistent

    4. Cooperative

    5. Empathic

    6. Socially Competent

    (Weinfield et al., 1999; Fonagy, 2000)

Attachment styles (Cont'd)

- Insecure Attachment: Having a less predictable, safe and warm bond with a care giver
- 40% of American children are found to have insecure attachments.
  1. Angry
  2. Bullying and Victimizing others
  3. Anxious
  4. Somatic Complaints
  5. Depressed

  (Weinfield et al., 1999; Fonagy, 2000)

Attachment styles (Cont'd)

- **Detached** : Not having any genuine human bond with any care giver

   1. Lack of development of conscience
   2. Interesting in inanimate objects
   3. Interested in power and money
   4. Externalizing on problems
   5. Manipulative
   6. Charismatic

Anger

- Functional: The role of this anger is to continue the bond between the care giver and the infant.

- Dysfunctional: The role is to terminate the relationship between the caregiver and the infant

Attachment Disorders

- Reactive Attachment Disorder (<u>RAD</u>)

1. <u>Inhibited Type:</u> The child withdraws from social interactions in most situations

2. <u>Disinhibited Type:</u> The child is indiscriminately sociable and affectionate with strangers

   (American Psychiatric Association DSM-IV, 1994, World Health Organization ICD-10, 1992)

Predicting Attachment Disorders

1. Parental Mental Illness
2. Substance Abuse
3. Unpredictable Child Care
4. Trauma:
   - *Domestic Violence*
   - *Child Abuse and Maltreatment*
   - *Witnessing Violence*

(Belsky, 1996; Cicchetti, 1994; Sameroff, 1989)

Domains of Impairment*

1. Attachment
2. Biology
3. Affect/Emotional Regulation
4. Dissociation
5. Behavioral Control
6. Cognition
7. Self Concept
8. Systems of Meaning/Sense of Purpose and Meaning in Life

*   Cook, A., et al., 2005

Domains of Impairment: Attachment

- Uncertainty about the reliability and predictability of the world
- Problems with boundaries
- Social isolation
- Difficulty attuning to other people's emotional states
- Difficulty with perspective taking
- Difficulty enlisting other people as allies
- Inability to trust
- Problems with others
- Re-victimization by others, victimizing others

- Hypersensitivity to physical contact
- Loss of sensation to pain
- Problems with coordination, balance, body tone
- Physical symptoms that are exacerbated by stress which may or may not have concrete physiological causes
- Chronic pain
- Increased medical problems across a wide span, e.g., pelvic pain, asthma, skin problems, etc

Domains of Impairment: Affect Regulation

- Difficulty with emotional self-regulation – intense affect (high or low)
- Difficulty describing feelings and internal experience
- Problems knowing and describing internal states
- Difficulty communicating wishes and desires
- Problems with the expression of emotions
- Suicidal preoccupation

Domains of Impairment: Dissociation

- Distinct alterations in states of consciousness
- Amnesia
- Depersonalization and de-realization

- Poor modulation of impulses
- Self-destructive behavior
- Aggression against others
- Pathological self-soothing behaviors
- Sleep disturbances
- Eating disorders
- Substance abuse
- Excessive compliance
- Oppositional behavior
- Difficulty understanding and complying with rules

- Difficulties in attention regulation and executive functioning
- Lack of sustained curiosity
- Problems with processing new information
- Problems focusing on and completing tasks
- Difficulty planning and anticipating
- Problems understanding own contribution to what happens to them
- Learning difficulties
- Problems with orientation in time and space

Domains of Impairment: Self-Concept/self-perception

- Lack of a continuous, predictable sense of self
- Sense of ineffectiveness
- Feeling of being permanently damaged
- Disturbances of body image
- Low self-esteem
- Shame and guilt
- Minimizing the impact of past traumatic experiences

Domains of Impairment:
Systems of Meaning/Sense of Purpose and Meaning in Life

- Foreshortened future, hopelessness, pessimism
- Problematic sustaining beliefs
- Feels has no purpose in life

- Adapted from: Complex Trauma in Children and Adolescents, White Paper from the National Child Traumatic Stress Network, Complex Trauma Task Force (http://www.nctsnet.org/nctsn_assets/pdfs/edu_materials/ComplexTrauma_All.pdf)
- And SPARCS, Structured Psychotherapy for Adolescents Responding to Chronic Stress

- **I. Attachment (ΔΕΣΜΟΣ)**

- *Αβεβαιότητα σχετικά με την αξιοπιστία και την προβλεπτικότητα του κόσμου Προβλήματα με όρια. Κοινωνική απομόνωση. Δυσκολίες στην προοπτική*

- Δυσκολία προσαρμογής συναισθηματικής με άλλους ανθρώπους

- Δυσκολία αναγνώρισης ότι άλλα άτομα μπορούν να γίνουν σύμμαχοι

- Αδυναμία να εμπιστεύεσαι. Προβλήματα με άλλους

- Γίνεται θύμα και θυματοποιεί (φαύλος κύκλος ΘΥΜΑ/ΘΥΤΗ)

- Increased Homelessness
- Incarceration of the mentally ill
- Overflow of emergency rooms
- Increase of violent behavior
- Increased homicides/suicides
- Financial overburden/taxation

- 24.4 BILLION $$$$ of direct cost (hospitalization, MH treatment, child welfare, law enforcement, judicial system expenses)

- 69.7 BILLION $$$$ indirect cost (Special Ed., juvenile delinquency, adult MH, lost productivity, adult criminality

B. Van der Kolk 2005

- **<u>Attachment</u>**

1. **Care-giver Affect Management** (how a care-giver manages their own affect will effect the outcome of a situation)

2. **Attunement** (the capacity of a care-giver to accurately read the persons cues and respond appropriately: Ugandan mothers)

3. **Consistent Response** (this is the one that gives us problems. What do we mean by consistency here???? Inter vs. intra individual)

4. **Routines and Rituals** ("these are the invisible bookends that bracket our day: Blaustein & Kinniburgh, 2010). These are the things that we look forward to and guide us through the week. Youth become oriented based on the day they have therapy.

- ## <u>Self Regulation:</u>

- The awareness and understanding of internal experiences, ability to modify that experience and the ability to safely share that experience with others.

1. **Affect Identification** (disconnect of affect in individuals who have been traumatized: "its ok," I AM NOT ANGRY"

2. **Modulation** (affect regulation; 0-100 in no time)

3. **Affect Expression** (due to their past experiences with sharing affective material, individuals may hide, or over exaggerate feelings) (which bottle are you?)

- <u>Competency:</u>

  - "The ability to achieve mastery and success. Developing and consolidating positive and coherent sense of self."

1. Executive Functions (cognitive skills residing in the pre-frontal cortex)

2. Self Development and Identity (infancy, latency age, adolescence) Unique self, Positive self, Coherent self, Future self

- <u>Integration</u>

- Trauma Experience Integration with in the treatment/caregiving system: (final step in the ARC model. Here the goal is to draw upon the previous nine blocks, and guide/support the individual to a coherent/integrated sense of self. Assist in the consolidation the fragmented self parts

  within the therapeutic system)

ARC

- <u>Attachment:</u> How do you assist with Attachment?

- <u>Self Regulation:</u> How do you assist with self Regulation?

- <u>Competency:</u> How do you assist with Competencies?

Kristine M. Kinniburgh, LICSW & Margaret E. Blaustein, Ph.D (2005)

	Youth	Care-giver
Cognitions	I'm bad, unlovable, damaged; I can't trust anyone	I'm ineffective, my client is rejecting me, do I belong here
Emotions	Shame, anger, fear, hopelessness	Frustration, shame, anger, fear, worry, sadness, hopelessness-helplessness
Behavior/Coping Strategies	Avoidance, aggression, preemptive rejection	Overreacting, controlling, shutting down, overly permissive
The Cycle	I'm being controlled, I have to fight harder	S/he keeps fighting with me, I need to dig in my heels Blaustein & Kinniburgh, 2010

- A type of maltreatment that is endorsed by the society in which the individual lives.
- Is transferred from generation to generation
- Examples:
  - Failure to touch the infant
  - Co-sleep
  - Breast feed

Walant, 1995
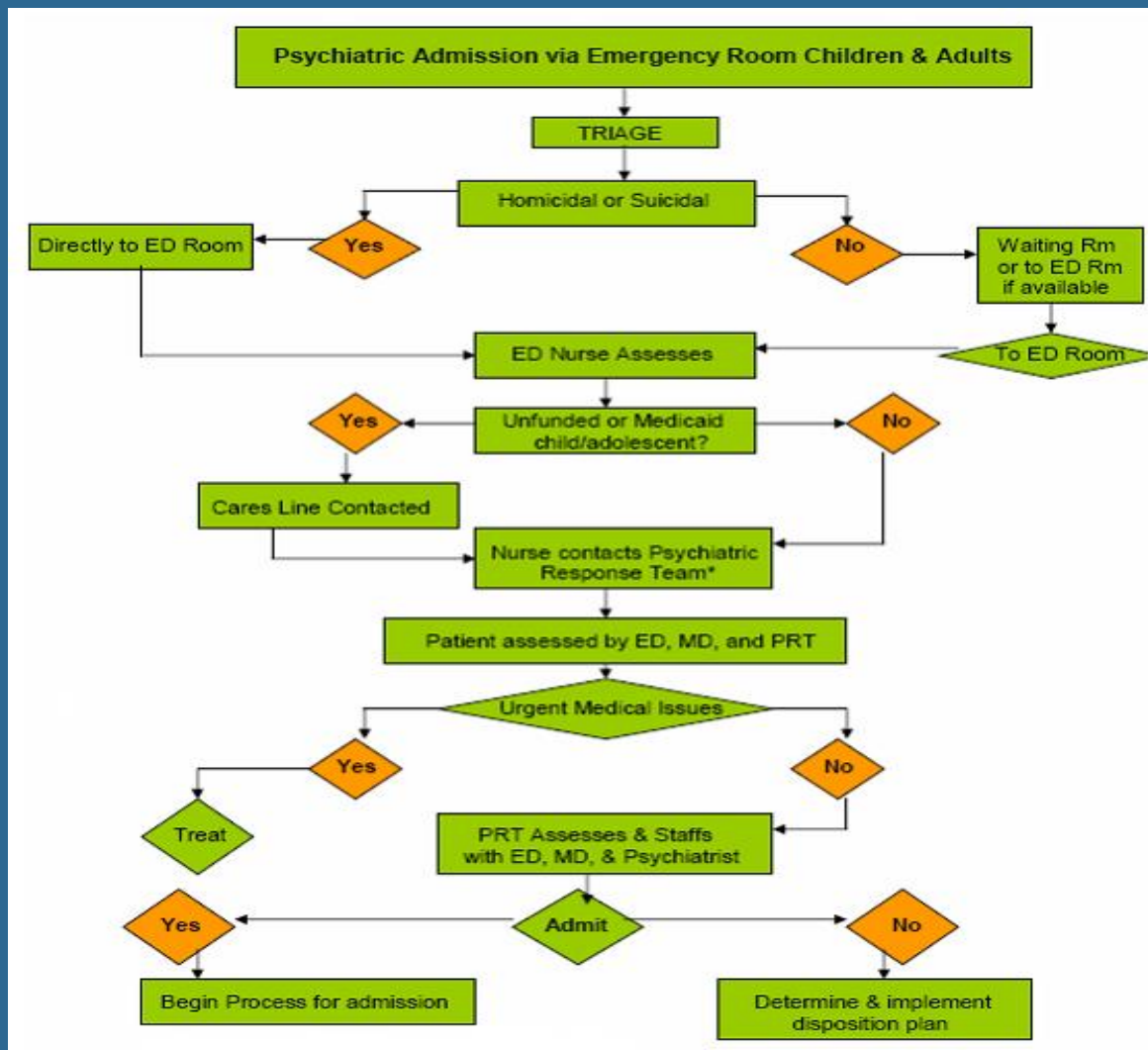
Barriers to change

- All novel situations and new information are judged to be threatening until proven otherwise
- Fear inhibits exploration, learning, and opportunities
- Gabby Grant, 2012/ Perry, The Amazing Brain
- Organizational & Individual
  - Fear of the unknown
  - Fear of making a mistake
  - Change is uncomfortable
  - Influence of others
  - Multiple priorities

Reasons we do what we do

- We are here for the $$$$$$$$$$$$$$$$$

- We are here for the fame

- We are here for the plush office space

- Characteristics of a care giver which make us willing and able to provide help:
  - Compulsive care giving
  - Need to be liked
  - Need to control

- Consensus-Based Definition

"Trauma-Informed Care is a strengths-based framework that is grounded in an understanding of responsiveness to the impacts of trauma, that emphasizes physical, psychological, and emotional safety for both the providers and survivors, and that creates opportunities for survivors to rebuild a sense of control and empowerment"

Hopper et. al. 2010

- Basic Principles

1. <u>Trauma Awareness:</u> service providers incorporate trauma understanding into their work, via staff training, consultation and supervision. Dealing with vicarious trauma and self-care are also essential elements of this principle.

2. <u>Emphasis on Safety:</u> TIC works on building physical and emotional safety for consumers and providers, as well as other residents. The agency should take care of potential triggers for consumers and avoid retraumatization. Establish clear roles and boundaries that result from collaborative decision-making.

3. <u>Opportunities to rebuild control:</u> Because control has been taken away from people who have been traumatized, it is imperative to emphasize the importance of choice for consumers. This allows for rebuilding of self efficacy and personal control over their lives. This supposes the involvement of consumers in decision making.

4. <u>Strengths-Based Approach:</u> Emphasis is placed on strengths rather than deficits. Provide the opportunity for individuals to identify their own strengths and develop their own skills. This in turn fosters resiliency

Hopper et al, 2010

1. Establish Safety: secure safety, stabilize symptoms, self care
2. Remembrance and Mourning: reconstruct trauma, transform the traumatic memory (emotional left-overs)
3. Reconnection: reconciliation with the self, reconnection with others, resolving the trauma

Gabriella Grant, 2012

Trauma-Informed Shifts

1. One problem, one solution
2. One time to disclose
3. Compliance/obedience
4. Prescriptive
5. People need fixing first

1. Interconnected problems and solutions
2. Multiple opportunities to disclose/discuss/change
3. Empowerment, collaboration, trust
4. Choice
5. People need safety first

SAMHSA Trauma-Informed Summit 2010

Lasting Effects of Neglect

- Boston Children's Hospital: MRI brain scans indicate that there are brain changes in children who are neglected and deprived of "normal" emotional and social interaction

- Measurable lower grey and white brain matter

- White matter: responsible for connectivity between parts of the brain- it is the "information superhighway- of the brain

- Grey matter: responsible for sensory perception and muscle control

- Given the right care it can be undone

- Laura Blue, Time, July 24, 2012

Amygdala

- Fear based memories: present oriented

Lymbic System

- Puppy brain, warm and fuzzy: past oriented

Pre-frontal Cortex

- Executive functioning: future oriented

Do you speak Amygdala?

- Focus on SAFETY Physical and Emotional
- Offer food and water
- Orient the person to the physical layout of the place
- Use natural tone of voice
- Be aware of personal space
- Monitor and correct breathing
- Offer simple choices
- Notice small positive changes and celebrate
- You know that you are out of Amygdala when person takes interest in environment and you

Interventions

- Create structure
- Predictability
- Increase care-givers ability to manage intense affect
- Provide STABLE relationships
- Provide safe, healthy environments

Interventions (cont'd)

- Improve care-giver-child ATTUNMENT
- USE PRAISE
- Focus on COMPETENCIES rather than DEFICITS
- Quality care
- Communicate
- Offer play
- Listen to music
- Read to them

- Allow the individual to express positive and negative emotions
- Keep in mind that interventions that work are NOT:
    1. **Simple**
    2. **Fast**
    3. **Inexpensive**
    4. **Easy to implement**
  (From: Neurons to Neighborhoods, 2000)
- Respect Cultural Norms
- Dispel myths about punishment/consequences
- Work on changing public policies
- Work on **taking care of your self**

Care-giver behaviors

- Model behaviors you expect of your clients
- Be aware of your affect modulation
- Be aware of verbal and none verbal communication
- Be courteous, organized and helpful
- Be available: make the person feel that they are the most important person at the moment
- Always be aware of confidentiality and take caution in protecting it
- Be aware of referrals, or how to obtain info about them
- Promise only things you can deliver
- Be sensitive of cultural and diversity issues, consult if you do not know

Melissa Brymer, et al., 2009

- Mood Elevator: Become aware how own mood impacts the way we understand and respond to challenging/problem behaviors

Self Care

- We are called to "give" of ourselves on a daily basis, what do we need to do in order to continue to be effective and compassionate care givers?!

Signs of Trauma Exposure Response

- Hypervigilance
- Suspicions/distrust
- Diminish Creativity
- Dissociative Moments
- Sense of Persecution
- Guilt
- Fear

- Inability to Empathize/Numbing
- Addictions
- Anger
- Cynicism
- Sarcasm
- Grandiosity

Self care

- Life away from work
- Hobbies
- Not expensive solutions
- Avoid MUPs